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August 9, 1999

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Assistant Commissioner for Patents  
Washington, D.C. 20231

Re: U.S. Utility Patent Application  
Appl. No. 09/329,354; Filed: June 10, 1999  
For: **Superscalar RISC Instruction Scheduling**  
Inventor(s): Garg *et al.*  
Our Ref: SP035.C5

Sir:

Transmitted herewith for appropriate action are the following documents:

1. Request for Corrected Official Filing Receipt;
2. Copy of Official Filing Receipt with corrections noted in red; and
3. One (1) return postcard.

It is respectfully requested that the attached postcard be stamped with the date of filing of these documents, and that it be returned to our courier. In the event that extensions of time are necessary to prevent abandonment of this patent application, then such extensions of time are hereby petitioned.

Assistant Commissioner for Patents  
August 9, 1999  
Page 2

The U.S. Patent and Trademark Office is hereby authorized to charge any fee deficiency, or credit any overpayment, to our Deposit Account No. 19-0036. A duplicate copy of this letter is enclosed.

Respectfully submitted,

STERNE, KESSLER, GOLDSTEIN & FOX P.L.L.C.

A handwritten signature in black ink, appearing to read "Donald J. Featherstone". The signature is fluid and cursive, with a long horizontal stroke at the end.

Donald J. Featherstone  
Agent for Applicants  
Registration No. 33,876

DJF/mmb

SERIAL NUMBER 09/329,354	FILING DATE 06/10/99	CLASS 395	GROUP ART UNIT 2763 2154	ATTORNEY DOCKET NO. SP035-C5
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APPLICANT  
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**\*\*CONTINUING DOMESTIC DATA\*\*\*\*\***

VERIFIED THIS APPLN IS A CCN OF 08/990,414 12/15/97  
 WHICH IS A CON OF 08/594,401 01/31/96 PAT 5,737,624  
 WHICH IS A CON OF 08/219,425 03/29/94 PAT 5,497,499  
 WHICH IS A CON OF 07/860,719 03/31/92 ABN

**\*\*371 (NAT'L STAGE) DATA\*\*\*\*\***

VERIFIED

**\*\*FOREIGN APPLICATIONS\*\*\*\*\***

VERIFIED

IF REQUIRED, FOREIGN FILING LICENSE GRANTED 07/01/99

Foreign Priority claimed 35 USC 119 (a-d) conditions met	<input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> yes <input type="checkbox"/> no <input type="checkbox"/> Met after Allowance	STATE OR COUNTRY CA	SHEETS DRAWING 9	TOTAL CLAIMS 1	INDEPENDENT CLAIMS 1
Verified and Acknowledged Examiner's Initials _____ Initials _____					

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TITLE  
SUPERSCALAR RISC INSTRUCTION SCHEDULING

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